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SERIAL NUMBER 10/766,124	FILING OR 371(c) DATE 01/28/2004 RULE	CLASS 424	GROUP ART UNIT 1618	ATTORNEY DOCKET NO. CP 108
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/490,060 07/24/2003
 and claims benefit of 60/468,470 05/06/2003
 and claims benefit of 60/458,993 03/28/2003
 and claims benefit of 60/443,618 01/29/2003
 and claims benefit of 60/443,237 01/28/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

08/08/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 0	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

Multiparticulate compositions of milnacipran for oral administration

FILING FEE RECEIVED 1044	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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